



2662

AMENDMENT TRANSMITTAL FORM

Mail Stop Non Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attorney Docket No.: 000054
Customer No. 23696
In Re Application of: JALALI
Serial Number: 09/943,277
Filed: 08/30/2001
Examiner: SABA TSEGAYE
Group Art Unit: 2662

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SEP 04 2003

Technology Center 2600

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

In addition, the following documents are enclosed:

1. ☐ A Petition for Extension of Time: () month(s) is hereby requested.
2. ☐ Information Disclosure Statement (IDS):
 - a. ☐ PTO-1449
 - b. ☐ Copies of IDS Citations (number of citations: 1)
3. ☐ Change of Attorney's Address in Application.
4. ☒ Other: FORMAL DRAWINGS IN 6 REPLACEMENT SHEETS; ANNOTATED DRAWINGS W/ CHANGES IN 6 SHEETS

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	35	37	0	x \$18 =	\$0.00
Independent**	8	8	0	x \$84 =	\$0.00
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$280	\$0.00
EXTENSION FEES			<input type="checkbox"/> One Month	\$110	\$0.00
			<input type="checkbox"/> Two Months	\$410	\$0.00
			<input type="checkbox"/> Three Months	\$930	\$0.00
INFORMATION DISCLOSURE STATEMENT			<input type="checkbox"/> After First Office Action	\$180	\$0.00
			<input type="checkbox"/> After Final Office Action	\$130	\$0.00
TERMINAL DISCLAIMER				\$110	\$0.00
*If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c.				TOTAL FEE	\$0.00

5. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
6. ☐ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$0.00.
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
7. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 08/29/2003

Signature:

QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 651-4125
Facsimile: (858) 658-2502

Rupit Patel, Reg. No. 53,441
(858) 651-7435



PATENT

B/A
A. Williams
9/15/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application)

No. 09/943,277)

JALALI)

Examiner: SABA TSEGAYE)

Filed: August 30, 2001)

For: METHOD AND APPARATUS
FOR MULTI-PATH
ELIMINATION IN A
WIRELESS COMMUNICATION
SYSTEM

) Group No. 2662

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RESPONSE TO OFFICE ACTION

Technology Center 2600

Mail Stop Non Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Commissioner:

In response to the Office Action dated 06/02/2003 please amend the above-identified application as indicated below.

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

- ☒ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: Christine Hughey
(type or print name)Date: 08/29/2003Signature: Christine Hughey**FACSIMILE**

- ☐ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: _____
(type or print name)

Date: _____

Signature: _____